| CLAIMS AS FILED - PART I                                     |  |  |                                      |                                   |  |                               |        | SMALL ENTITY        |                        |         | OTHER THAN          |                        |  |
|--|--|--|--------------------------------------|-----------------------------------|--|-------------------------------|--------|---------------------|------------------------|---------|---------------------|------------------------|--|
|  |  |  | (Colum                               | nn 1)                             | (Column 2)                             |                               | ,<br>- | TYPE                |                        | OR<br>- |                     |                        |  |
| U.S. NATIONAL STAGE FEES                                     |  |  |                                      |                                   |  |                               |        | RATE                | FEE                    |         | RATE                | FEE                    |  |
| BA:  | SIC FEE  |  | SMALL EN                             | T. = \$ 150                       | LARGE ENT. = \$ 300                    |                               |        | BASIC FEE           | 150                    | OR      | BASIC FEE           |                        |  |
| EΧ   | MINATION FI                                    | EE   | Satisfies PCT                        |                                   | All other situations = \$ 100 / \$ 200 |                               | 1      | EXAM. FEE           | 50                     | 1       | EXAM. FEE           |                        |  |
| SEA  | ARCH FEE                                       |  | U.S. is ISA = ALL other co           | ountries =                        | All other situations = \$ 250 / \$ 500 |                               |        | SEARCH FEE          | 100                    |         | SEARCH FEE          |                        |  |
| FEE FOR EXTRA SPEC. PGS.                                     |  |  | 119 minus 100 =                      |                                   | 19/50=                                 |                               |        | X \$ 125 =          | 125                    | i:      | X \$ 250 =          |                        |  |
| τοτ  | AL CHARGEA                                     | BLE CLAIMS   | 18° m                                | inus 20 =                         | •                                      |                               |        | X \$ 25 =           |                        | OR      | X \$ 50 =           |                        |  |
| IND  | EPENDENT CL                                    | AIMS   | 1 1                                  | ninus 3 =                         | *                                      |                               |        | X \$ 100 =          |                        | OR      | X \$ 200 =          |                        |  |
| MUL  | TIPLE DEPEN                                    | DENT CLAIM PR  | ESENT                                |                                   |  |                               |        | + \$ 180 =          |                        | OR      | + \$ 360 =          |                        |  |
| • If the difference in column 1 is less than zero, enter     |  |  |                                      |                                   |  | olumn 2                       |        | TOTAL               |                        | OR      | TOTAL               |                        |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |  |  |                                      |                                   |  |                               |        | SMALL E             | NTITY                  | OR      | OTHER<br>SMALL E    |                        |  |
| AMENDMENT A  |  | CLAIMS REMAINING AFTER AMENDMENT   |                                      | HIGH<br>NUME<br>PREVIO<br>PAID    | BER<br>JUSLY                           | PRESENT<br>EXTRA              |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | •  | Minus                                | **                                |  | =                             |        | X \$ 25 =           |                        | OR      | X \$ 50 =           |                        |  |
|  | Independent                                    | *  | Minus                                | ***                               |  | =                             |        | X \$ 100 =          |                        | OR      | X \$ 200 =          |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                      |                                   |  |                               |        | + \$ 180 =          |                        | OR      | + \$ 360 =          |                        |  |
|  |  |  |                                      |                                   |  |                               | _      | TOTAL ADDIT.<br>FEE |                        | OR      | TOTAL ADDIT.<br>FEE |                        |  |
|  |  | (Column 1)   |                                      | (Colum                            | ın 2)                                  | (Column 3)                    |        |                     |                        | _       |                     |                        |  |
| ENT 8  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                      | HIGHE<br>NUME<br>PREVIO<br>PAID F | ER<br>USLY                             | PRESENT<br>EXTRA              |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | •  | Minus                                | 44                                |  | =                             |        | X \$ 25 =           |                        | OR      | X \$ 50 =           |                        |  |
| AMENDM   | Independent                                    | •.   | Minus                                | ***                               |  | =-                            |        | X \$ 100 =          |                        | OR      | X \$ 200 =          | · .                    |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CL    |  |                                      |                                   | LAIM                                   |                               | Ī      | + \$ 180 =          |                        | OR      | + \$ 360 =          | , .                    |  |
|  |  |  |                                      |                                   |  |                               |        |                     |                        | OR      | TOTAL ADDIT.<br>FEE |                        |  |
|  |  |  |                                      |                                   | ·                                      | •                             |        | FEE <b>L</b>        |                        |         |                     | ·                      |  |
| ***  | If the "Highest Nu<br>If the "Highest Nu       | mn 1 is less than the<br>mber Previously Pak<br>mber Previously Pak<br>nber Previously Pak | d For IN THIS SI<br>d For IN THIS SI | PACE is less<br>PACE is less      | than '20<br>than '3'.                  | r', enter "20".<br>enter "3". | In the | appropriate box     | in column 1.           | ,       |                     | <u>.</u>               |  |

PATENT APPLICATION FEE DETERMINATION RECORD.

Exercise December 8, 2004

Application or Docket Number